

Automatic Credit Card Payment Authorization

Please read carefully:

I am requesting **TEN**CU to transfer funds from my Credit Union account as payment to my Credit Card. I understand that my payment will post to my credit card on the 2nd of each month. Several days later the funds will be transferred from my designated account. I also understand that if the funds are not in my account or cannot be covered by my overdraft option in time for the automatic payment, it will be my responsibility to make the payment by some other means.

Ν	ame:	Accou	ınt #:	SS #:	
Credit Card Account Number:					
A	ddress				_
С	ity:St	ateZip	Code		
Signature:		Effe	Effective Date:		
AUTOMATIC PAYMENTS WILL POST ONLY ON THE STATEMENT DUE DATE					
Please deduct my payment from: TENCU Regular Share Savings TENCU Draft Account					
Please select from the following payment options					
	Pay the minimum payn	nent amount only			
	Pay balance in full statement balance minus any cycle-to-date payments/credits				
	Pay a designated amou	unt of \$each mo	onth. Must be mo	re than minimum payment due	Э.
Make the following changes per my request.					
	Change my designated	d payment amount to \$	each mo	nth.	
	Stop Auto Pay as of the	next payment due date			
		For Employee	Use Only		
	Request Received E	зу:		Date:	
	Request Processed	Ву:		Date:	
	Request Verified By	•		Date:	

REQUESTS MUST BE PROCESSED AND VERIFIED BY E-OPERATIONS.

TENCU Revised 11/2023